Docket No. 243647US2S

### IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF: Kanna TOMIYE, et al.

SERIAL NO: New Application

GAU:

FILED:

Herewith

**EXAMINER:** 

FOR:

11010 1110

SEMICONDUCTOR DEVICE AND SEMICONDUCTOR DEVICE MANUFACTURING METHOD

## INFORMATION DISCLOSURE STATEMENT UNDER 37 CFR 1.97

COMMISSIONER FOR PATENTS ALEXANDRIA, VIRGINIA 22313

SIR

Applicant(s) wish to disclose the following information.

#### REFERENCES

- The applicant(s) wish to make of record the references listed on the attached form PTO-1449. Copies of the listed references are attached, where required, as are either statements of relevancy or any readily available English translations of pertinent portions of any non-English language references.
- ☐ A check or credit card payment form is attached in the amount required under 37 CFR §1.17(p).

## **RELATED CASES**

- Attached is a list of applicant's pending application(s) or issued patent(s) which may be related to the present application. A copy of the patent(s), together with a copy of the claims and drawings of the pending application(s) is attached along with PTO 1449.
- ☐ A check or credit card payment form is attached in the amount required under 37 CFR §1.17(p).

#### **CERTIFICATION**

- ☐ Each item of information contained in this information disclosure statement was first cited in a communication from a foreign patent office in a counterpart foreign application not more than three months prior to the filing of this statement.
- □ No item of information contained in this information disclosure statement was cited in a communication from a foreign patent office in a counterpart foreign application or, to the knowledge of the undersigned, having made reasonable inquiry, was known to any individual designated in 37 CFR §1.56(c) more than three months prior to the filing of this statement.

## DEPOSIT ACCOUNT

Please charge any additional fees for the papers being filed herewith and for which no check or credit card payment is enclosed herewith, or credit any overpayment to deposit account number 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

OBLON, SPIVAK, McCLELLAND, MAIER & NEUSTADT, P.C.

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C. Irvin McClelland
Registration Number 21,124

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22850

Tel. (703) 413-3000 Fax. (703) 413-2220 (OSMMN 05/03) DOCKET NO: 243647US2S Sheet <u>1</u> of <u>1</u>

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FOR: SEMICONDUCTOR DEVICE AND SEMICONDUCTOR DEVICE

MANUFACTURING METHOD

## **STATEMENT OF RELEVANCY**

# Reference AO (JP 9-135030) on Form PTO- 1449:

There are fully-depleted transistors and partially-depleted transistors on the same SOI. (Fig. 12, 13, 14 and line 44 of right-lower portion of page 4 - line 13 of left portion of page 5)

| Form PTO 1449 |               | U.S. DEPARTMENT         | OF COMMERCE      | ATTY DOCKET NO.<br>243647US2S |                          |                | SERIAL N        | SERIAL NO.                 |  |
|---------------|---------------|-------------------------|------------------|-------------------------------|--------------------------|----------------|-----------------|----------------------------|--|
| (Modified)    |               | PATENT AND TRA          | DEMARK OFFICE    |                               |                          |                | New Application |                            |  |
|               |               |                         |                  | APPLICANT                     |                          |                |                 |                            |  |
| LIST OF       | REFER         | ENCES CITED BY AF       | PLICANT          | Kanna TC                      | MIYE, et al.             |                |                 |                            |  |
|               |               |                         |                  | FILING DATE Herewith          |                          |                | GROUP           |                            |  |
|               |               |                         |                  |                               |                          |                |                 |                            |  |
|               |               |                         |                  |                               | DOCUMENTS                | <del>-</del> . | <u> </u>        |                            |  |
| EXAMINER      |               | DOCUMENT DATE           |                  | NAME CLASS                    |                          |                | SUB FILING DATE |                            |  |
| INITIAL       |               | NUMBER DAT              |                  | INAME                         |                          | CLASS          | CLASS           | IF APPROPRIATE             |  |
|               | AA            |                         |                  |                               |                          |                |                 |                            |  |
|               | AB            |                         |                  |                               |                          |                |                 |                            |  |
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|               |               |                         | F                | DREIGN PATI                   | ENT DOCUMENTS            | <del></del>    | -т              |                            |  |
|               | DOCUMENT DATE |                         |                  | COUNTRY                       |                          |                | TRANSLATION     |                            |  |
|               |               | NUMBER DATE             |                  |                               |                          |                | YES NO          |                            |  |
|               | AO            | 9-135030                | 05/20/97         | Japan                         |                          |                |                 | ×                          |  |
|               | AP            |                         |                  |                               |                          |                |                 |                            |  |
|               | AQ            |                         |                  |                               |                          |                | <u> </u>        |                            |  |
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|               | AS            |                         |                  |                               |                          |                |                 |                            |  |
|               | AT            |                         |                  |                               |                          |                |                 |                            |  |
|               | AU            |                         |                  |                               |                          |                |                 |                            |  |
|               | AV            |                         |                  |                               |                          |                |                 |                            |  |
|               | _1            | OTHER                   | REFERENCES       | (Includina A                  | uthor, Title, Date, Perl | inent Pages.   | etc.)           |                            |  |
|               | 1             |                         |                  |                               | MOS SRAM Cell", INTE     |                |                 | N DEVICE MEETING,          |  |
|               | AW            | TECHNICAL DIGES         | T (USA), 2002    | , 4 pages                     |                          |                |                 | •                          |  |
|               |               |                         |                  |                               |                          |                |                 |                            |  |
|               | AX            |                         |                  |                               |                          |                |                 |                            |  |
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|               |               |                         |                  |                               |                          |                |                 |                            |  |
|               | AZ            |                         |                  |                               |                          | □ Ad           | Iditional Ref   | ferences sheet(s) attached |  |
|               |               |                         |                  |                               |                          |                |                 | . ,                        |  |
| Examiner      |               |                         |                  |                               |                          | Date C         | Date Considered |                            |  |
| *Examiner:    | Initial if    | reference is considere  | ed, whether or r | not citation is i             | n conformance with MP    | EP 609; Draw   | line throug     | h citation if not in       |  |
| conformance   | e and n       | not considered. Include | copy of this fo  | rm with next c                | ommunication to applic   | ant.           |                 |                            |  |